

Application Data Sheet**Application Information**

Application Type:: National Stage
Subject Matter:: Utility
Suggested Classification::
Suggested Group Art Unit::
CD-ROM or CD-R?:: None
Number of CD disks::
Number of Copies of CDs::
Sequence Submission?:: Paper
Computer Readable Form (CRF):: No
Number of copies of CRF:: 0
Title:: AVIDIN MUTANTS
Attorney Docket Number:: 3502-1105
Request for Early
Publication?::
Request for Non-Publication?:: No
Suggested Drawing Figure::
Total Drawing Sheets:: 18
Small Entity?:: Yes
Latin Name::
Variety Denomination Name::
Petition Included?:: No
Petition Type::
Licensed US Gov't Agency::
Contract or Grant Numbers::
Secrecy Order in Parent No
Appl.?::

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FINLAND
Status:: Full Capacity
Given Name:: HENRI
Middle Name:: RAINER
Family Name:: NORDLUND
Name Suffix::
City of Residence:: LEMPÄÄLÄ
State or Province of Residence::
Country of Residence:: FINLAND
Street of Mailing Address:: KULMATIE 10
Address::
City of Mailing Address:: LEMPÄÄLÄ
State or Province of Mailing Address::
Country of Mailing Address:: FINLAND
Postal or Zip Code of Mailing Address:: FI-37560

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FINLAND
Status:: Full Capacity
Given Name:: OLLI
Middle Name:: HEIKKI
Family Name:: LAITINEN
Name Suffix::
City of Residence:: KUOPIO
State or Province of Residence::
Country of Residence:: FINLAND
Street of Mailing Address:: SÄRKINIEMENTIE 11 D 33
Address::
City of Mailing Address:: KUOPIO

State or Province of Mailing Address::

Country of Mailing Address:: FINLAND

Postal or Zip Code of Mailing Address:: FI-70700

Applicant Authority Type:: Inventor

Primary Citizenship Country:: FINLAND

Status:: Full Capacity

Given Name:: VESA

Middle Name:: PEKKA

Family Name:: HYTÖNEN

Name Suffix::

City of Residence:: GEIFENSEE

State or Province of

Residence::

Country of Residence:: SWITZERLAND

Street of Mailing BURSTWIESENSTRASSE 17

Address::

City of Mailing Address:: GEIFENSEE

State or Province of Mailing Address::

Country of Mailing Address:: SWITZERLAND

Postal or Zip Code of Mailing Address:: CH-8606

Applicant Authority Type:: Inventor

Primary Citizenship Country:: FINLAND

Status:: Full Capacity

Given Name:: MARKKU

Middle Name:: SAKARI

Family Name:: KULOMAA

Name Suffix::

City of Residence:: TAMPERE

State or Province of

Residence::

Country of Residence:: FINLAND

Street of Mailing KOULUKATU 16 A 16

Address::

City of Mailing Address:: TAMPERE

State or Province of Mailing Address::

Country of Mailing Address:: FINLAND

Postal or Zip Code of Mailing Address:: FI-33200

Correspondence Information

Correspondence Customer 00466

Number::

Representative Information

Representative Customer	00466
Number::	

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/FI2004/000679	11/15/04

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
FINLAND	20031663	11/14/03	Yes

Assignment Information

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::